



TEEN ARMY FAMILY ACTION PLAN (AFAP) Registration Form



Come help to make a difference!

Saturday, 21 January 2006

- ? Return completed registration forms by 9 January 2006 to Army Community Services Building 50010, on Smith Street. or fax to 533-3778.
- ? Conference is 21 January 2006 from 0800-1600 at Youth Services. Lunch will be provided.
- ? Mandatory training will be conducted at the start of the conference.

PLEASE PRINT

FIRST NAME _____ MI ____ LAST NAME _____

AGE _____ GRADE _____ SCHOOL _____

MAILING ADDRESS _____

PHONE NUMBER _____

DO YOU NEED SPECIAL ACCOMODATIONS? _____ If so, what Accommodations are needed?

CIRCLE IF PARENT(S) is/are: Active Military Retired Military Dept. of the Army Civilian

PARENT NAME _____ WORK PHONE _____

PARENT SIGNATURE _____

TEEN PARENTAL PERMISSION FORM DA 5671 MUST BE SIGNED BEFORE ATTENDING CONFERENCE.

Parents, if your child has your permission to attend the Out-Brief to act as a spokesperson or to show support for the spokespersons, please sign below. The Out-brief is scheduled on 27 January from 0900-1200 at Thunder Mountain Activity Center (TMAC). Transportation is not provided.

_____ (does or does not) have my permission to attend the
Out-Brief on 27 January. I understand that I will need to arrange transportation.

Signature of Parent or Legal Guardian

Date

DATA REQUIRED BY THE PRIVACY ACT OF 1974: AUTHORITY: 5 USC 301, 10 USC 3013. PRINCIPAL PURPOSE: Identification of participants in the Army Family Action Plan Conference. ROUTINE USES: Used to record the names and addresses of attendees of the Army Family Action Plan Conference. Used to contact participants, for preparation of conference materials, and official Army reporting purposes. DISCLOSURE: Disclosure is voluntary.